

REMARKS

Claims 1-9, 11, 15 and 21-33 have been cancelled as being directed to the non-elected invention. Claims 10, 12-14 and 17 have been amended, and new claims 34-45 have been added. Upon entry of the present amendment, claims 10, 12-14, 16-20, and 34-45 will be pending. No new matter has been added.

Support for the amended and newly added claims can be found, e.g., on page 10, lines 18-42; page 11, lines 1-13; page 15, lines 1-19; page 23, lines 9-33; page 24, lines 1-13; page 26, lines 6-10; page 33, lines 26-31; page 36, lines 3-33; page 37, lines 1-13; page 45, lines 10-13; original claims 1-6, and in Examples 9-10, of the specification.

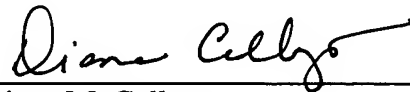
Response to Restriction Requirement

In response to the Restriction Requirement mailed from the Patent Office on August 26, 2003, Applicants hereby elect the invention of Group III (claims 10-12, 14-16, and 24) directed to a method of treating autoimmune disorders using an IL-22 inhibitor with traverse. As discussed telephonically with Examiner Kapust, Applicants respectfully request the Examiner to re-join the inventions of Group III and VIII. The invention of Group VIII is directed to a method of treating arthritic symptoms by administering an anti-IL22 antibody. Applicants submit that claim 10, as originally filed and as currently amended, is generic to the treatment of autoimmune disorders using an anti-IL22 antibody, and thus encompasses the patentably distinct species of amelioration of arthritic symptoms presently claimed as Group VIII.

Reconsideration and re-joinder of the inventions of Group III and VIII is respectfully requested.

A Petition for a One-Month Extension of Time is being submitted herewith. Please charge the extension fee of \$110.00 to Deposit Account No. 07-1060, Reference No. GI 5358 CIP. The Commissioner is hereby authorized to charge any additional fees that may be due in connection with the above-referenced matter, or credit any overpayment of same, to Deposit Account No. 07-1060, Attorney Reference No. GI 5358 CIP. Should any questions or issues arise concerning this application, the Examiner is encouraged to contact the undersigned at the telephone number provided below.

Respectfully submitted,



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